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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	April 12, 2004
First Named Inventor	KESTER et al.
Art Unit	n/a
Examiner Name	n/a
Attorney Docket Number	20712-0110

I hereby appoint:

☒ Practitioners at Customer Number

26587

OR☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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Individual Name

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City

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ZIP

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Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Douglas Alan Kester

Signature

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.

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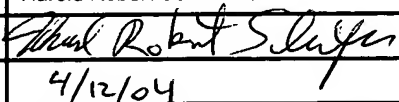
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Name Harold Robert Schnetzka

Signature



Date

4/12/04

Telephone

717-225-3557

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SIGNATURE of Applicant or Assignee of Record

Name Mustafa Kemal Yanik

Signature



Date

4/12/04

Telephone

(703) 771 6181

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SIGNATURE of Applicant or Assignee of Record

Name John F. Judge

Signature

Date

4/12/04

Telephone

717-771-7149

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Name Mahesh Valiya Naduvath

Signature *V.N. Mahesh*

Date

04/12/04

Telephone

717-771-6197

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SIGNATURE of Applicant or Assignee of Record

Name Frank Highland Hill, IV

Signature

Date

Telephone

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